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UTILITY PATENT APPLICATION **TRANSMITTAL**

I II SE II IV GITLUI		Craig A. Zimmrman					
Every Mail Labol No. EV 291142369 US							

(Only for new nonprovision	nal applications under 37 CFR 1.53(b)) <u>E</u> X	oress n	viali Label i	VO.					
APPLICA	1	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application								
See MPEP chapter 600 cond	nts.	Washington, DC 20231								
1. Submit an original and a Applicant claims s See 37 CFR 1.27. 3. Specification (preferred arrangement - Descriptive title - Cross Reference - Statement Regional and a Reference to see or a computer p - Background of - Brief Summary	[Total Pages 11] It set forth below) of the invention the to Related Applications arding Fed sponsored R & Dequence listing, a table, program listing appendix the Invention		a. Sp	ii. 🗌 pap	rogram (Amino Acecessary) Readable quence I -ROM or per s verifyin	Appendix id Seque e Form (C Listing or CD-R (2	ence S CRF) n: copie:	ubmission s); or ove copies	0 15563 U.S. Pro 10/618512	
 Detailed Descri 		ľ	Assignment Papers (cover sheet & document(s))							
Claim(s)Abstract of the	Disclosure		10.	37 CFR 3.7				Powero		
	· [4]		11.	(when there English Tra		•	nt (if o	J Attorney		
4. Drawing(s) (35 U5. Oath or Declaration	S.C. 113) [Total Sheets 4]	12.	Information	Disclos	ıre	III (II a	Copies o	f IDS	
	-	,		Statement			_ن_	J Citations		
a. Newly execu		13. Preliminary Amendment Return Receipt Postcard (MPEP 503)								
b. L (for continual		(Should be specifically itemized)								
j. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR			15. Certified Copy of Priority Document(s) (if foreign priority is claimed)							
			16 Nonpublication Request under 35 U.S.C. 122							
1.63(d)(2)	and 1.33(b).	1				nt must a	ittach i	form PTO/S	B/35	
6. Application Data	Sheet. See 37 CFR 1.76	1	or its equivalent. 17. Other: Certificate of Mailing							
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or in an Application Data She	CATION, check appropriate box, and a set under 37 CFR 1.76:	suppiy ine	ə requisi	ite information	i below a	na in a p	reiimir	nary ameno	ment,	
Continuation	Divisional Continuation-in-part (C	CIP)	of p	orior application N	o.:	_/			_	
Prior application information: Examiner: Group Art Unit:										
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	relied upon when a portion has been ina							ated by rere		
	19. CORRESPO	NDENCE	ADDR	ESS	-					
Customer Number or Bar Co	ode Label (Insert Customer No. or Attac	ch bar code l	COMPANY NAMED COMPANY	or		Сопеѕропо	dence ac	ddress below		
Name	THOMAS J. FINN									
	RAYTHEON COMPANY					******				
Address	P. O. Box 902 (EO/E4/N119)									
City	 _ 		tate CA.			Zip Code 90245-09		902		
Country	USA	Telephoi	ne 5	20-794-7	980	Fa	X	520-794	-8171	
Name (Print/Type)	Thomas J. Finn		Regist	ration No. (A	\ttorney	(Agent)		48,066		
Signature	1 wmas) ,				Date	7/	11/03		

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FEE TRANSMITTA		Complete if Known									
FEE IKANSIVIIIIAI	┕▐	Appli	cation I	Numbe	er	NOT YET ASSIGNED					
for FY 2003		Filing	Date		ŀ	HEREWITH					
Effective 01/01/2003. Patent fees are subject to annual revision.		First Named Inventor			ntor (CRAIG A. ZIMMERMAN					
		Examiner Name				NOT YET ASSIGNED					
Applicant claims small entity status. See 37 CFR 1.27	—[Art Unit NO				NOT YET ASSIGNED					
TOTAL AMOUNT OF PAYMENT (\$) 750.00		Attorney Docket No. PD-02W130									
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)										
Check Credit card Money Other None	3. ADDITIONAL FEES										
Deposit Account:	Large Entity Small Entity										
Deposit Account 50-0888	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Description	Fee Paid				
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Deposit RAYTHEON COMPANY	1052	50	2052		Surcha cover s	arge - late provisional filing fee or					
Name	1053	130	1053			nglish specification					
The Commissioner Is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812 2	2,520	For filin	ng a request for ex parte reexamina	tion				
Charge any additional fee(s) during the pendency of this application	1804	920*	1804			sting publication of SIR prior to ner action					
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805		Reque	esting publication of SIR after ner action					
to the above-identified deposit account. FEE CALCULATION	1251	110	2251	55		sion for reply within first month					
1. BASIC FILING FEE	1252	410	2252,	205	Extens	sion for reply within second month	<u> </u>				
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Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Extens	sion for reply within fourth month					
1001 750 2001 375 Utility filing fee 750.00	1255	1,970	2255	985	Extens	sion for reply within fifth month					
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice	otice of Appeal					
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a	iling a brief in support of an appeal					
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Reques	equest for oral hearing					
005 160 2005 80 Provisional filing fee 1451 1,510 145						n to institute a public use proceeding	g				
SUBTOTAL (1) (\$) 750.00	1452		2452	55	Petition	n to revive - unavoidable					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2453			n to revive - unintentional					
Fee from Extra Claims below Fee Paid	1501	1,300 470	2501 2502		•	issue fee (or reissue) 1 issue fee					
Total Claims 1520** = -0- x = -0-	1503	630	2503		_	issue fee					
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Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806	180	Submis	ssion of Information Disclosure Str	nt				
Fee Fee Fee Fee <u>Fee Description</u> Code (\$)	8021	40	8021	40	Record	ding each patent assignment per ty (times number of properties)					
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809	750	2809		Filing a	a submission after final rejection					
1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375		FR 1.129(a)) ich additional invention to be					
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	375		ned (37 CFR 1.129(b)) est for Continued Examination (RC	E)				
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SUBTOTAL (2) (\$) -0- Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) -0-											
SUBMITTED BY (Complete (if applicable)											
Name (Print/Type) Thomas J. Finn Registration No. (Attomet/Agent) 48,066 Telephone 520.794.7980											

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